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ABSTRACT

As of June 1995, the federal government had granted to 28 states waivers from current federal laws and regulations, allowing states to test a wide range of welfare reform approaches. This study, conducted by the National Center for Children in Poverty, examined the evaluation plans of 21 waiver experiments in 17 states, focusing on the impact of welfare reform on family income, parenting stress behaviors, and children's access to services. For each impact study, recipients of Aid to Families with Dependent Children were randomly assigned to either an experimental group participating in the welfare reform approach or a control group. The major findings indicated that: (1) evaluators are collecting a great range of child-related data, but few variables were common among many states, reducing the chances for cross-state learning to inform national policy; (2) some waiver evaluations may lead to new information regarding children's education, particularly for states evaluating "learnfare" approaches; (3) some evaluations track potential harms to children related to family dysfunction, foster care placement, and substance abuse; (4) the waiver evaluations will not be able to demonstrate the ways welfare reform affects children's growth and development because very few variables directly measure such changes; and (5) variables in some evaluation plans related to children's services, but few related to quality services or to outcome measures indicating the effectiveness of those services, especially for child care and child health. (Appendices contain background information on selected states, research questions, and children's well-being variables. Contains 24 references.) (KB)

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WORKING PAPER

State Welfare Waiver Evaluations: Will They Increase Our Understanding of the Impact of Welfare Reform on Children?

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The **National Center for Children in Poverty** (NCCP) was established in 1989 at the School of Public Health, Columbia University. Its mission is to identify and promote strategies that reduce the number of young children living in poverty in the United States, and that improve the life chances of the millions of children under six who are growing up poor.

The Center:

- Alerts the public to demographic statistics about child poverty and to the scientific research on the serious impact of poverty on young children, their families, and their communities.
- Designs and conducts field-based studies to identify programs, policies, and practices that work best for young children and their families living in poverty.
- Disseminates information about early childhood care and education, child health, and family and community support to government officials, private organizations, and child advocates, and provides a state and local perspective on relevant national issues.
- Brings together public and private groups to assess the efficacy of current and potential strategies to lower the young child poverty rate and to improve the well-being of young children in poverty, their families, and their communities.
- Challenges policymakers and opinion leaders to help ameliorate the adverse consequences of poverty on young children.

The Center's publications program is funded largely through core grants from the Ford Foundation and the Carnegie Corporation of New York.

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Introduction

While the Clinton Administration and Congress formulate and debate welfare reform legislation, states and localities are conducting welfare "experiments" of their own. As of June 1995, the federal government granted to 28 states waivers from current federal laws and regulations to test a wide range of welfare reform approaches. Many additional states had submitted requests for waivers.

The number of approved and pending waivers has continued to grow. These approaches—often referred to as "Section 1115 Waivers" because they are pursuant to Section 1115 of the Social Security Act—provide important lessons for other states and communities. The "experiments" include, but are not limited to, implementing time limits on cash assistance, broadening the categories of adults who are mandatory JOBS participants (the 1988 Family Support Act's welfare-to-work program), increasing periods of eligibility for child care subsidies, and using changes in levels of cash assistance to modify adult and child behaviors.

These welfare initiatives hold the potential to have a significant impact on the healthy growth and development of children. An oft-repeated fact in policy debates is that approximately two-thirds of welfare recipients are children. In sheer numbers alone, children living in households receiving Aid to Families with Dependent Children (AFDC) are the population most likely to feel the greatest impact of welfare reform experiments. However, policymakers have difficulty going beyond this one fact to develop research-based hypotheses of how a particular welfare-reform initiative will change the lives of children as it changes the lives of those adults who are most often an initiative's primary target.

This paper identifies areas of anticipated new research findings on welfare initiatives' impact on children that will result from evaluations of waiver experiments in 17 states. To frame this discussion, the three primary areas where prior research on children in poverty indicate that welfare initiatives could have a significant impact on children in poverty are summarized: (1) by changing family income; (2) by affecting parental stress and parenting behaviors; and (3) by changing children's access to services and supports outside the family that promote children's healthy growth and development.

After reviewing these three areas more fully, an analysis of the evaluation plans for states' Section 1115 Waivers is provided. The findings are then presented in terms of the numbers and categories of research questions and hypotheses that relate to children, the child-related variables that the evaluations use to seek answers to the research questions, and the potential of these child-related variables to further the understanding of the impact of welfare experiments

on children. The paper concludes with recommendations for future evaluations of welfare reform's impacts on children.

At the time of this writing, federal welfare legislation, if enacted, would fundamentally alter the federal financing structure of AFDC and the degree of federal oversight and monitoring that takes place. The new legislation would eliminate the need for Section 1115 Waivers from existing program rules, along with requirements that states "rigorously" evaluate their experiments. Therefore, the futures of the specific waiver evaluations that are the subject of this paper are in question. However, the new federal welfare legislation creates a need for such research to help guide states and communities in the design and modification of their welfare programs.

In such a context, it is important to understand ways in which approaches used in waiver evaluations can shed light on the impact of welfare reform on children. The purpose is to maintain and increase states' use of the most effective strategies for state evaluations. In addition, it will be important for new research to comprehend current evaluation strategies that limit the potential to learn about the effects of welfare reform on children. Such a new understanding is essential to protect poor children and promote their healthy growth and development in a world of sweeping policy change.

Welfare Reform's High Stakes for Children

Two fundamental concepts frame our analysis and help us understand the areas in which welfare initiatives can affect children; i.e., family income, the quality of parenting, and children's access to essential services.

First, the research of Zill et. al and Duncan[1] demonstrates that it is poverty that affects children's well-being, as opposed to whether a family's primary source of income is AFDC or wages. This has immense significance in assessing the potential effect of welfare reform on children. Efforts to decrease the degree to which a family's income source is cash assistance (as separate from efforts to increase family income) may be socially desirable for reasons besides improved child well-being. However, research indicates that changes in family income rather than changes in the source of that income will be what affects the growth and development of children.

A second important concept for understanding how welfare initiatives affect children, is that children are not themselves wealthy or poor; rather, they live in families that vary in their access to economic and social resources. In this country, the financial status of parents determines the material wealth or deprivation that children and adults confront.* Therefore, one cannot significantly improve the lot of children without assisting their parents (indirectly in cases in which vouchers for children's services substitute for family income), nor can one

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* Many other industrialized nations provide financial assistance to all families with children to ensure them an equitable living standard.[2] By contrast, AFDC and related programs leave recipient households well below the poverty line.[3]

punish parents without imposing hardships on children, at least in the short term. This is the crux of the struggle of policymakers who try to provide a safety net for children while simultaneously encouraging or discouraging specific behaviors of adults.

With these two concepts, a framework using current research can be constructed that projects ways in which welfare policies could potentially affect children's well-being. First, research indicates that material deprivation (which is the definition of poverty) is only one aspect of the needed children's perspective. Some of the most devastating ways that children are affected by poverty occur through the ways that their parents are affected. For adults, the stress, depression, feelings of inadequacy, and loss of control brought on by poverty can greatly compromise parenting styles. These feelings can increase negative parenting behaviors such as harshness, unresponsiveness, and even violence, and they can jeopardize parents' abilities to provide safe, nurturing, and developmentally stimulating homes. Finally, low family income also can mean that children grow up in neighborhoods that lack adequate basic services and supports, such as health care, education, and child care.

Family Income

The most obvious way that welfare initiatives affect children is through their impact on families' financial well-being. The very definition of poverty implies that parents lack the financial resources to provide adequate food, shelter, and other basic needs for their families. Family income dictates many aspects of the level of material resources available to children and the environments in which children live. The level of income dictates what food, shelter, clothing, and other necessities families can purchase. Housing costs force many low-income families to live in communities characterized by poor housing and infrastructure, low-quality services, and high levels of community violence. Many of these conditions associated with family income relate directly to children's well-being.[4]

In some ways, the category of "family income" overlaps with another aspect of our conception of the areas in which welfare reform will have an impact on children—children's services. Traditionally, higher-income families purchase basic services like child care, early education programs such as preschool, and child health insurance (which most often comes as part of employment benefits). In the last decade, government has increasingly subsidized these services or provided them for free for some children in poverty. Because the availability of high quality services in these areas is essential to children's growth and development, they are considered separately in this review.

The effect of the material inadequacies brought on by poverty can be devastating for children in terms of their health and cognitive development. Children in poverty have a higher exposure to serious health problems than nonpoor children.[5] For infants, health problems include low birthweight and prematurity, vulnerability to neonatal respiratory distress, and increased risk of Sudden Infant Death Syndrome (SIDS).[6] Poor children are more likely to be

hospitalized because of infectious diseases (in part because of lower immunization rates); to experience chronic health problems like asthma, anemia, and lead poisoning; and to suffer from accidents and injuries (including child abuse). Many of these health problems exert their influence throughout a child's life. They can limit activity, hamper learning, and contribute to social and emotional difficulties.

In addition to the long-term consequences of poor health, poverty often limits a child's access to the safe and varied environments that permit exploration and stimulate learning. Consequently, poverty's effects also show up in cognitive deficits. For instance, a recent study of 895 five-year-olds in eight sites, all of whom were born at low birthweight, found that "poverty" reduced children's IQ scores by five points even when a host of other factors were held constant.[7] Moreover, children who were persistently poor suffered IQ deficits twice as great as those who experienced transitory poverty, confirming that the impact of poverty on development accumulates and intensifies the longer poverty lasts.

The most clear and obvious tie between welfare initiatives and children's well-being is in the area of family income. Many of the current initiatives attempt to either change families' economic status or to modify adult behavior through changes in work requirements, benefits duration and/or benefit levels.* If initiatives succeed in moving adults into jobs that result in higher net family income, they may have an impact on children, but there is little empirical evidence to help us identify the threshold of positive change that would create beneficial effects on children's development.[9]

Persistent family poverty appears to be worse than transitory poverty for children's developmental outcomes, but there is no precise understanding of how marginal, negative changes in income affect those children already living in poor families.[10] It is also not known to what degree the unpredictability and instability of income will negatively affect child development over and above the level of income available to families. Without tracking changes in children's health and developmental outcomes along with changes in family income, it will be difficult to gauge exactly what a little more or a little less income and/or income stability will mean for children.

Parenting and Parental Stress

The intertwining of the lives and futures of children and parents goes beyond shared financial resources. Research shows that poverty also affects children by influencing their parents' behavior.[11] In addition to making decisions about trying to meet their families' material needs when there is not enough money to cover all the associated costs, parents struggling with poverty may not have the time or psychological resources to spend with their children; they also may be depressed and withdrawn, angry and punitive, or anxious and erratic.[12]

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* Pending federal legislation proposals for welfare reform could reduce family income and access to health services by as much as $1,200 and $1,300 respectively for families with incomes below $13,000.[8]

The psychological impacts of poverty on parents are especially severe in single-parent households. Single mothers are more prone than married women to anxiety, depression, and health problems and often bear alone the burdens of child rearing.[13] Research shows that poor single parents are likely to be more punitive, inconsistent, and unresponsive than other parents when they interact with their children.[14] Children who experience harsh parenting and indifference are more prone to psychological problems and behavioral disturbances.[15]

Welfare initiatives, therefore, may have substantial impacts on children through their effects on the parenting behaviors of adults. Will emerging welfare policies increase stress on parents and negatively affect parenting behaviors? Or will they contribute to experiences and life circumstances that strengthen parents' psychological resources and parenting styles? Will initiatives have simultaneous effects on parenting that work against one another? The potential effects of welfare policies on parenting are difficult to measure, and consequently they are imperfectly understood.

Several groups are undertaking the difficult process of developing new methods and measures to examine the impact of changes in welfare policies on parenting and child development. They are employing these methods and measures with subsamples involved in major evaluations. These groups include a collaboration developed by Mathematica Policy Research with researchers at Columbia University to study the impact of the Teenage Parent Demonstration,[16] and a collaboration to assess the effects of the JOBS Child Outcomes Study developed by the Manpower Demonstration Research Corporation that includes researchers from Child Trends, the University of Minnesota, and Harvard University.[17]

Children's Services

The third major way that welfare policy affects children is by influencing the type and level of services they receive. As with other children living in low-income families, children in families receiving AFDC need basic supports such as child care, health services, education, and family support services. Poverty inhibits children's access to these kinds of services, as well as their quality, because families cannot afford to purchase what is best, or even in many cases, what is adequate. For some low-income families, access to certain services is provided through subsidies. These subsidies replace the family income that would otherwise be used to purchase the services. For some low-income families living in high-poverty areas, barriers to accessing services also include living in neighborhoods with few adequate services.[18]

Children receiving AFDC currently have two important entitlements that influence their access to services—health insurance through Medicaid, and child care subsidies if parents are employed or attending state-approved education and training programs. It is likely that changes in AFDC eligibility status will change children's access to these services. Some states and communities have tried to ensure that children in families receiving AFDC or moving from welfare to work are connected to other children's programs, such as Head Start or a state

prekindergarten program aimed at a broader population of children. All of these services may be available for fewer families in the immediate future, however, as a result of federal block grants and/or federal and state funding reductions.

The quality of services, as well as access to services, affects children's health and development. This is particularly true in the case of nonparental child care. Research indicates that child care of good quality can enhance children's growth and development, while poor quality child care negatively affects growth and development.[19] Therefore, welfare reforms that force parents to make child care arrangements while they work or prepare for work hold a potential to have a significant impact on children's growth and development.

Welfare initiatives will certainly have an impact on children in the three areas delineated—family income, parenting, and access to children's services. From a developmental point of view, it is likely that a combination of these three factors will affect children's well-being. The nature and degree of effects, as well as pathways of influence, are difficult to predict. Are there some effects, for example, such as drastic changes in family income that will overshadow all other effects? Would different welfare initiatives, such as time limits for cash assistance and improved access to child care, work against one another to produce limited net effects? Would some subpopulations of children, such as children of teenage parents or very young children, experience particularly acute effects from welfare initiatives? These are only a few of the unanswered questions.

Study Design

The federal requirement that Section 1115 Waivers include rigorous evaluations with independent evaluators created opportunities to further the understanding of the dynamic relationship between welfare reform initiatives and children's health and development. Although the future of specific evaluations is uncertain due to pending federal legislation, it is clear that the need to evaluate the impact of welfare initiatives on children's well-being will remain tremendously important. To understand how the current waiver evaluations may provide a picture of the effects of welfare reform experiments on children, and on children's services, NCCP collected the evaluation plans for 21 waiver evaluations from 17 states in July 1995.* These states were: Arkansas, Colorado, Florida, Illinois, Iowa, Maryland, Michigan, Minnesota, New Jersey, New York, Ohio, Oregon, South Dakota, Utah, Virginia, Vermont, and Wisconsin.

Although these evaluations often included several types of research, such as process and implementation studies, or cost-benefit analyses, NCCP's analysis is limited to the impact studies. Plans for these impact studies provided the most specific information about child-related variables and questions. In addition, they were often the central piece of waiver evaluations.

Each impact study design includes the random assignment of AFDC recipients into two groups—one control group that does not participate in the welfare experiment, and one experimental group that does participate. The research questions and hypotheses that guided the evaluation are excerpted from the evaluation plans. The particular approaches applied in each welfare experiment are used to put these questions and the specific variables into context.

NCCP then identified information about those variables (from the impact study components of evaluation plans) that were directly related to children's well-being. All of the evaluation plans tracked families' economic status. Many also tracked additional evidence of material deprivation, such as insufficient food at the end of the month. However, the evaluation plans differed greatly in the degree to which they included direct measures of children's well-being or assessed children's access to and quality of services. Such measures could enable researchers to assess the degree to which changes in family income (beyond those that caused significant material deprivation) made a difference for children's health and development.

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* Evaluation plans for 11 states—California, Connecticut, Georgia, Hawaii, Indiana, Mississippi, Missouri, Montana, Nebraska, Pennsylvania, and South Carolina—were not included in this report. NCCP did not obtain these evaluation plans for a variety of reasons, primarily because the evaluation approach was not fully designed, or because states were in the process of making further changes to their welfare programs that would affect the evaluation.

The latter two groups of variables are divided into four categories:*

- Children's services (including child care, child health, child welfare, and child education),
- Parenting/family functioning,
- Family structure,
- Other indicators of children's well-being.

Limitations of Study Approach

This paper describes only partially the level and quality of new information about the impact of welfare initiatives on children that may result from the waiver evaluations. A clearer picture is limited for the following reasons:

- The evaluation plans may differ in their levels of validity. Information on some of the variables appeared to be collected in ways that were more valid and meaningful than others. However, the analysis did not include an investigation of these methodological issues.
- The evaluation plans varied in their levels of specificity and completeness. In some instances, plans were less specific because states and evaluators were at earlier stages of research implementation, and it was not yet clear which specific variables could be assessed. In other cases, terminology for variables, such as "value of child care," were not specific enough to give the reader a full understanding of what was being measured. Did this mean the price of child care? Or expenses incurred by the program participant or by the state? The author's assessment of the measures being used in part may be an assessment of the degree of specificity in the available research plans.
- The evaluation plans may differ significantly from the research design that is actually implemented. NCCP collected the documents that were most current for each state as of June 1995. However, in the changing context of state and local welfare policies and programs, and as evaluators and states become more intimately familiar with specific characteristics of a state's data systems, it is likely that some evaluations will be modified.
- Other components of the evaluations, in addition to the impact studies, may provide critical information about the impact of welfare reform on children and children's services. The process and implementation analyses, part of virtually all waiver evaluations, seek to

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* In Appendix 3, which lists the child-related variables discussed in the findings section of the paper, the reader will note that the table does not include variables related to family income status. The authors made the decision not to include these variables for three reasons: 1) they were present in all the evaluation plans, so their depiction in the table would provide the reader with little new information since this is stated clearly in the text of the paper; 2) they are of limited use as their importance is revealing only to the extent that other child-related measures also exist in the study, which are depicted in the table; and 3) they were so great in number that virtually all the indicators used for every evaluation plan could be included in the table, which would compromise the clarity of the presentation.

document the program and system connections that appear to be necessary for the success of the welfare policy experiment. Evaluators may be looking at specific connections with services that are important for children, such as ensuring that parents in education and training programs have easy access to child care subsidies, or that referrals to family support programs are made in appropriate circumstances. Although such information is potentially valuable, NCCP could not excerpt it from the evaluation plans because most of the documents lacked the specificity to make it possible to gauge to what degree case management and connections with services were child-centered. In many cases, when phrases such as "services," "program referrals," and "case management" were used, it was unclear whether they included children's services and programs, or whether they referred to case management focused on adults that went beyond training and job placement. It was also unclear to what degree, if at all, these components of evaluations measured the responsiveness of services to children's needs.

Likewise, cost-benefit analyses often included variables that were specific about children's needs. However, these often overlapped greatly with variables collected for impact analysis. Time and resource constraints led NCCP, therefore, to determine that our current efforts would be best spent on a careful look at the impact study components of the evaluation plans—rather than on cost-benefit analyses.

Despite these limitations, this paper offers a first step toward more coherent, meaningful research about children and welfare reforms. This is the first attempt that the authors know of to collect and analyze evaluation plans from the perspective of their potential to shed light on children's development outcomes. For all its design imperfections, such a first step is necessary to begin the dialogue among researchers, policymakers, and others about the promises and limitations of current approaches and to prioritize new research needs.

Major Findings and Implications

This paper's findings are presented in three sections. First, to set the context, the categories of provisions that are included in the 21 state waiver experiments that are the subject of the evaluation plans are described. Next, this paper describes and discusses the significance of child-related research questions and hypotheses that guide the experiments. The paper concludes with a discussion of the child-related variables used and their potential values in furthering an understanding of the impact of welfare initiatives on children's well-being.

The initiatives whose evaluation plans were assessed most often contained a number of provisions that fell into several categories. Evaluators frequently refer to these welfare initiatives as "stews" because it is difficult to attribute outcomes to any specific provision in the mix. Table 1 on page 14 shows the different categories of provisions and the number of initiatives that are included in such provisions. In the 21 waiver experiments, the majority of provisions are related to increasing the income incentives for adults to work (through enabling families to keep more of their earnings from work, converting food stamps to cash, etc.), increasing participation requirements in education and training, and imposing financial sanctions for noncooperation. A number of provisions are related directly to children, such as sanctions related to child immunizations, child support provisions, and more generous child care benefits. Appendix 1 contains a brief description of each welfare initiative that was the subject of an evaluation and indicates the source of information for our assessment of the waiver evaluations.

The analysis of the plans for impact studies indicated that evaluators and state policymakers have structured their studies in ways that will lead to a moderate amount of new information about the effects of welfare reform on children. Data collected that will shed some light on child well-being appear in impact analyses designed both for those initiatives that include provisions specifically targeted to improving parenting or children's well-being (such as fatherhood projects, children's immunization requirements, "learnfare"*), as well as those targeted more traditionally to adult-related goals (such as increased JOBS participation or time limits for cash assistance).

* "Learnfare" refers to those programs that make adjustments in families' cash benefits levels (either positively or negatively) to encourage children's school attendance.

Table 1. Categories of Provisions in the 21 State Waiver Programs for Which Evaluation Plans Were Analyzed

Category of Provision	No. of Welfare Initiatives That Include Such Provisions
Increased earnings disregards; changes in asset limits; food stamp conversions into cash	12
Increased participation in education, training, and job search activities	11
Cash benefits sanctions or termination for noncooperation	9
School attendance and living arrangement requirements for teenage AFDC recipients	6
Requirements (including sanctions and benefits) related to school-age children's school participation and/or performance	4
Sanctions related to children's health care and/or immunization	4
Cash assistance time limits	4
Provisions limiting or eliminating increases in cash assistance associated with the birth of children while receiving AFDC	4
Child support provisions	3
More generous child care benefits	3
Up-front cash payments in lieu of AFDC receipt	2
Extension of Transitional Medicaid Assistance	2
Work requirements	2
Case management requirements	1

The Research Questions

Of the 107 research questions and/or hypotheses that guided the 21 impact studies, 35 addressed issues concerning children's services and well-being, parenting, family functioning, and family formation. Table 2 on page 15 summarizes specific topics of the research questions:* Appendix 2 provides a full compilation of the specific research questions for each evaluation.

Only five of the evaluations included questions related to children's well-being in general. (See Table 2 on page 15.) The rest of the questions related to issues that researchers and state policymakers believed were specific indicators of children's well-being, such as family structure and new births, or immunization, or access to prenatal and preventive health. The highest number of evaluation questions concerned new births, and "family structure and stability" issues. These latter questions often relate to marital rates, divorce rates, and address changes.

* Questions add up to more than 35 because some of the research questions concerned multiple topics.

Another set of questions, which were defined as "child-related" because they may indicate increased parental involvement, relate to paternity establishment and child support. It appeared that questions on these issues were posed, in large part, because of the financial implications, both to the family and to the state, of child support payments rather than the fact that child support and/or paternity establishment may indicate a father's increased involvement with his children.

Table 2. Categories of Child-Related Evaluation Questions for 21 State 1115 Waiver Evaluations

Topics of Questions	No. of Questions	No. of Evaluations
New births, family structure, and stability	10	7
Parenting	7	3
School attendance	7	5
Paternity establishment and/or child support	5	5
General well-being of children and "youth functioning"	5	5
Prenatal/preventive health care	3	1
Child protective services and foster care	2	2
Immunization	1	1

Analysis of Variables Used to Answer the Research Questions

Appendix 3 summarizes the variables related directly or indirectly to children's services, parenting, family formation, and other indicators of children's well-being. ***This information shows that evaluators are collecting a great range of data related to children, but few variables are common among many states. The lack of common variables across states will dramatically reduce the chances for cross-state learning to inform national policy.*** The exception is in the case of indicators of family structure and formation. Despite great variation, some general themes emerged from NCCP's analyses.

- ***Some waiver evaluations may lead to some new information about child well-being that is readily interpretable in the area of children's education.*** In this area, 13 evaluation plans include a total of 34 variables directly related to outcomes such as school attendance, progress to the next grade, or attainment of a high school diploma for either teenage parents and/or children of teen or adult heads of households.* The evaluations that include the most variables related to children's education often were designed to measure the effects of specific provisions targeted at teenage parents and/or "learnfare" programs. It may be possible,

* The count of variables was a "duplicated" count. Thus, if five plans collected variables for one specific issue, such as Medicaid coverage, we counted a total of "five" variables.

as a result of these waiver evaluations, to develop new insights on the impact of these provisions on children's school achievement.

- ***Some waiver evaluations will track some significant potential harms to children that may result from some welfare initiatives.*** Ten of the waiver evaluations include 23 variables that measured significant family dysfunction, such as substantiated cases of child abuse and neglect, foster care placement rates, and alcohol or drug abuse. For these evaluations, it may be possible to gauge the extent to which welfare experiments correlate with extreme family distress (if the evaluation methodologies are otherwise sound).

  In addition, there are other areas where measures are being applied that may make it possible to judge whether the effects of welfare initiatives are unambiguously bad for children. For instance, records showing that preschool children are left unsupervised while parents work or attend education or training would mean that these children are in serious jeopardy. In addition, the absence of child health insurance in any form will clearly indicate that children will not receive routine preventive care.

- ***The waiver evaluations will not be able to demonstrate the many ways that welfare reform may have an impact on children; this is because very few of the variables being used directly measure changes in children's growth and development.*** Eight evaluations have direct measures of children's health status, and seven evaluations have applied measures designed to assess some aspects of parent-child relationships. Beyond these limited measures, few variables relate directly to child health and development and/or to parenting. (The one exception is in the area of children's education, which is discussed above.)

  Without a record of direct measures of child health and development, it will not be possible to shed much additional light on the complex interactions between poverty, welfare policy, and child well-being. This is a critical issue. It may be that the welfare initiatives will result in significant improvements in children's health and development. It also may be that some welfare initiatives will have effects that are as equally devastating for children as those indicated by the measures of harm that evaluations *do* include. However, *without information about the effects of specific types of welfare experiments on specific child outcomes*, policymakers will be impeded in their development of initiatives that both pursue adult-related goals of economic independence and protect and support children's development. Such measures are included in the Teenage Parent Demonstration and the JOBS Child Outcomes Study mentioned previously. Thus, it is possible to include direct measures of child health and development in evaluations of welfare experiments.

- ***Variables in the evaluation plans related mostly to children's services, but very few relate to the quality of services or to outcome measures that indicate the effectiveness of services.*** In the areas of health, there was an emphasis on coverage and expense rather than use of services directly tied to children's healthy growth and development, such as prenatal care, WIC, immunizations, and periodic health screenings. Thirteen evaluations include some indicators of children's health status—such as those mentioned above as well as other variables

—for a total of 22 variables collected. In contrast, 19 evaluations use 76 variables related to Medicaid and private health insurance coverage. Many of the Medicaid and health insurance measures related to whether individuals have access to coverage and to the documentation of its use. Only one evaluation used a variable related to the quality of health care.

Variables that assess child care appear to be particularly inadequate for evaluating the effect of nonparental care on children's health and development. Of those 17 evaluations with variables related to child care, only six include one measure of child care quality—the parents' report of quality and reliability. Research has indicated that parental perception of quality is often unrelated to the *actual* quality of nonparental care.[20] Even in those cases where parents perceive poor quality, they are less likely to report it by responding to questions of "satisfaction" than to other types of questions, such as whether they would change arrangements if more options were available.[21]

Quality of nonparental care is an especially important factor to consider when assessing the potential effects of welfare reform on children. Research has shown that good quality child care improves developmental outcomes for low-income children, and that poor quality care impedes children's healthy growth and development.[22]

- ***It was not always clear that variables in the evaluations measured a desirable or an undesirable outcome from the perspective of improving children's health and development.*** For instance, in the parenting/family functioning category, six evaluations include variables to indicate whether parents had ever received counseling for personal problems. Within the context of the evaluation plan, it was not clear if this should be perceived as a positive or negative indicator of children's well-being. In other cases, the evaluation plan was designed to measure whether the initiative was effective in meeting a particular goal, but did not necessarily consider whether achieving the goal meant improvements for children.

  A notable example is in the area of family formation. Here, it often appeared that an underlying assumption of a welfare initiative was that marriage was a desirable outcome because marriages were perceived to be good for children. However, while it is generally recognized that children in two-parent families do better than children in single-parent families, it is unclear whether changes in family structure (to the degree to which they occur) resulting from changes in welfare policy will actually lead to individual children being marginally better or worse off. One could imagine a situation where drastic changes in welfare policy make AFDC so undesirable that a mother marries to achieve more economic stability for her family—but at a high personal price (such as family violence) that might cause tremendous stress and undermine the quality of her parenting. From a child development point of view, it may be difficult to interpret the meaning or effect of one change in family circumstances (e.g., marriage) without assessing changes in other family circumstances and ultimately in direct measures of child health and development.

Conclusion

Current waiver evaluations fall far short of ideal in helping us to understand how welfare initiatives may affect children's growth and development. With the exception of cases where it may be possible to illustrate significant harms to children, the variables used by the waiver evaluations will succeed only in pointing the way for further, more targeted research. In part, this is because evaluators are guided predominantly by questions about adult-related goals, with few questions directly related to child well-being. The other major limitation of the waiver evaluations is that they do not collect a core set of variables related to children to enable cross-state comparisons of the effects of different reforms.

The partial understanding of the effects of changes in welfare policies on children's well-being provided by current waiver evaluations can undoubtedly be enhanced by the design of richer evaluations. The national JOBS Child Outcome Study is a model of what is possible with the investment of significant resources.* For this study, evaluators are now collecting data related to parent-child relationships, maternal psychological well-being, child care (including measures of quality beyond parental reports of satisfaction), maternal characteristics, home and neighborhood characteristics, family characteristics, cognitive outcomes, physical health and safety outcomes, and social competency outcomes. Many of these areas are completely absent in the evaluation plans for the 1115 waivers; others appear in extremely limited ways. Nevertheless, it might be feasible for some of these variables, for at least *some* sub-samples of families with young children, to be collected in current and future evaluations of states' welfare initiatives.

This paper presents a critique of current evaluation plans as a means to begin dialogue between researchers, policymakers, and others about new directions in research in a world with increased state autonomy over programs affecting children and families in poverty. It is clear that evaluations of welfare initiatives are complicated and costly, and they involve making difficult trade-offs. It is not immediately clear what the most viable ways should be to evaluate the effects of different initiatives on children. Those in the field need to come together and develop some consensus about this critical area of research.

The lack of a specific focus on children in many evaluation plans reflects more than methodological difficulties: there is a basic disconnection between welfare "reform" on the one hand, and on the other, initiatives that promote children's health, growth, and development.

* The JOBS Child Outcomes Study is currently being conducted by Child Trends, Inc. under subcontract with the Manpower Demonstration Research Corporation. For more information, contact Child Trends, Inc. at (202) 362-5580.

Concurrent with the implementation of welfare initiatives, states are implementing a wide range of "children's initiatives," including comprehensive children's reform as described by the National Governors' Association[23] and the National Center for Children in Poverty.[24] Despite what appears to be a failure on the part of many policymakers to connect the two movements, it is likely that welfare policies hold the potential to greatly enhance, or greatly impede, children's readiness for school and other efforts to improve the growth and development of preschool children. Unfortunately, current waiver evaluations as designed may not shed much light on these links.

State waiver evaluations are not the only vehicle for learning about the potential impact of welfare reform initiatives. To move forward we need to identify additional routes to understanding how children whose families receive (or have received) AFDC fare in an era of great experimentation. There is a need to create additional explorations and studies where currently none exist. Only in that way can there be a full understanding of the high stakes of welfare reform for children.

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APPENDIX 1

Background Information on Selected States

ARKANSAS

Arkansas Welfare Demonstration Project (AWDP) eliminates increased AFDC benefits for additional children, provides family planning and parenting sessions for 13–17-year-olds, and requires participation in employment or educational activities through the New Hope program.

Source of Evaluation Information: *Arkansas Welfare Demonstration Project Waiver Evaluation Plan*, Department of Social Work, University of Arkansas at Little Rock, Little Rock, AR 72204. (Additional information obtained through a review of appendices by Robert Flynn Corwyn.)

Principal Investigators: Brent Benda and Carolyn Turturro

State Contact: Joie Wallis (501) 682-8275

COLORADO

Colorado Personal Responsibility and Employment Program (CPREP) consolidates AFDC, Food Stamps, and Child Care into a single benefits package. After two years, it removes from the grant any adult not working or participating in approved JOBS activities. It provides a more generous income disregard, sanctions AFDC households with children under two who do not receive immunizations, provides incentives to participants who graduate from high school or earn a GED, exempts the asset value of one car, and increases the resource limit.

Source of Evaluation Information: *CPREP Evaluation Plan*, The Centers, University of Colorado at Denver, 1445 Market Street, Suite 380, Denver, CO 80202, and the Center for Policy Research, 1720 Emerson Street, Denver, CO 80218, July 19, 1994. (Additional information obtained through a review of appendices by Peggy Cuciti.)

Principal Investigators: Peggy Cuciti (303) 820-5664

State Contact: Maynard Chapman (303) 866-2054

FLORIDA

Florida Family Transition Program (FTP) limits AFDC benefits to 24 months in any 60-month period for families that reach the time limit and do not cooperate; provides a more generous income disregard; lowers the age of the child for JOBS exemptions to six months; terminates family benefits for noncooperation (unless termination is likely to result in the child being placed in emergency or foster care); raises asset and vehicle limits (used primarily for self-sufficiency purposes); extends transitional Medicaid and child care benefits; requires school conferences and regular school attendance of all teenagers; and immunizations of preschool children.

Source of Evaluation Information: *Family Transition Program Evaluation Design*, Manpower Demonstration Research Corporation, Three Park Avenue, New York, NY 10016, February 1994. (Additional information obtained through a review of the appendices by Virginia Knox.)

Principal Investigator: Dan Bloom (212) 532-3200

State Contact: Don Winstead (904) 488-3271

ILLINOIS

Illinois Paternal Involvement Project (PIP) provides noncustodial fathers of AFDC children with employment, training, and parenting services through Project Chance, the Illinois JOBS program.

Source of Evaluation Information: *Evaluation Plan for the Paternal Involvement Project*, University of Illinois, Center for Urban Economic Development, 400 South Peoria Street, Room 2100, Chicago, IL 60607-7035, January 1994.

Principal Investigator: William Howard (312) 996-5587

State Contact: David Grunenfelder (217) 785-0754

IOWA	**Iowa Family Investment Program (FIP)** provides more generous income disregards and increased asset limits; limits JOBS exemptions; extends child care transitional benefits; and requires most parents to develop a self-sufficiency plan. Those failing to demonstrate effort/performance or choosing not to develop a plan can be terminated from AFDC and cannot reapply for six months. **Source of Evaluation Information:** *Evaluation Plan: Iowa Family Investment Program and Food Stamp Program*, Mathematica Policy Research, Inc., 600 Maryland Avenue, S.W., Suite 550, Washington, DC 20024, October 10, 1994. **Principal Investigator**: Thomas Fraker (202) 484-9220 **State Contact**: Ann Wieber (515) 281-7714
MARYLAND	**Primary Prevention Initiative (PPI)** imposes sanctions for poor school attendance of both teenage parents on AFDC and all AFDC children. It also imposes sanctions on AFDC recipients who do not receive preventive health care, including prenatal care, annual check-ups, and minimum standards for the Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT) schedule for infants and children. **Source of Evaluation Information:** *Primary Prevention Initiative Evaluation*, Schaefer Center for Public Policy, University of Baltimore, 1304 St. Paul Street, Baltimore, MD 21202, January 31, 1994. **Principal Investigator**: Dr. Larry Thomas (410) 837-6188 **State Contact**: Beth Boyd (410) 767-7925
MICHIGAN	**To Strengthen Michigan Families (TSMF)** eliminates most exemptions from participation in JOBS; requires AFDC applicants to do a job search; sanctions families 25 percent for the first 12 months of noncompliance; and stops AFDC benefits after 12 months of nonparticipation; imposes sanctions for lack of immunization of preschool children; and allows certain disregards for self-employed persons. **Source of Evaluation Information:** *The Evaluation of "To Strengthen Michigan Families:" Third Annual Report: Second-Year Impacts*, Abt Associates, Inc., 55 Wheeler Street, Cambridge, MA 02138, May 1995. **Principal Investigators**: Alan Werner, Robert Kornfield (617) 492-7100 **State Contacts**: Robert Lovell, Daniel Cleary (517) 335-0015
MINNESOTA	**Minnesota Family Investment Program (MFIP)** consolidates the AFDC, General Assistance, and Food Stamps programs; provides more generous earnings disregards; requires case management after two years of benefits receipt; and sanctions families for noncompliance. **Source of Evaluation Information:** *Proposed Design and Workplan for Evaluating the Minnesota Family Investment Program*, Manpower Demonstration Research Corporation, Three Park Avenue, New York, NY 10016, January 5, 1994. (Additional information obtained through a review of the appendices by Virginia Knox.) **Principal Investigator**: Virginia Knox (212) 532-3200 **State Contact**: Charles Johnson (612) 297-4727
NEW JERSEY	**Family Development Program (FDP)** provides more generous income disregards; eliminates increases in benefits for additional children; sanctions noncooperation; and extends Transitional Medicaid. Parents of children under two are required to participate in counseling and vocational assessment. Recipients working 30 hours or more per week are no longer exempt from participation. **Source of Evaluation Information:** *The Family Development Program: An Analysis of Impacts, Costs, and Benefits*. Rutgers, The State University School of Social Work, Bureau of Economic Research, Bldg. 4087-Kilmer Campus, New Brunswick, NJ 08903. (Additional information obtained through a review of appendices by Michael Camasso.)

Principal Investigator: Michael Camasso

State Contact: Dr. Rudolf Myers (609) 588-2414

NEW YORK

The New York State Child Assistance Program (CAP) provides payments for one-time work-related expenses or child care in lieu of AFDC benefits; provides Food Stamp benefits in cash; provides incentives for children to attend school; provides a child care stipend in advance; provides more generous earnings disregards; and requires a child support order for each CAP child.

Source of Evaluation Information: *The New York State Child Assistance Program: Program Impacts, Costs, and Benefits*, Abt Associates, Inc., 55 Wheeler Street, Cambridge, MA 02138, July 1993.

Principal Investigator: Chris Hamilton (617) 492-7100

State Contact: Mike Warner (518) 473-7344

OHIO 1

Ohio's Learning, Earning, and Parenting Program (LEAP) provides school enrollment and attendance bonuses and sanctions for pregnant and parenting teenagers on welfare who do not have a high school diploma or GED.

Source of Evaluation Information: *LEAP: Interim Findings on a Welfare Initiative to Improve School Attendance Among Teenage Parents*, Manpower Demonstration Research Corporation, Three Park Avenue, New York, NY 10016, May 1993. (Additional information collected by a telephone interview with David Long.)

Principal Investigator: David Long (212) 532-3200

State Contact: Steve Simich (614) 466-6024

OHIO 2

Transitions to Independence (Fair Work and Work Choice) Demonstration mandates employment and training for adult AFDC recipients whose youngest child is six or older. Work Choice is a voluntary program for single parents whose youngest child is between one and six years old.

Source of Evaluation Information: *The Ohio Transitions to Independence Demonstration*, Abt Associates, Inc., 55 Wheeler Street, Cambridge, MA 02138, December 1994.

Principal Investigators: David Fein, Erik Beecroft, John Blomquist (617) 492-7100

State Contact: Jackie Martin (614) 466-8530

OREGON 1

JOBS Waiver Project (JWP) requires participants with children ages one to six to participate full-time; makes JOBS programs available to pregnant women who are not AFDC recipients but who receive coverage under the low-income medical program; requires custodial parents under age 16 to participate in education activities and requires pregnant recipients under age 20 to participate in basic education; and sanctions noncooperation/participation.

Source of Evaluation Information: *Oregon JOBS Waiver Project Proposal*. Regional Research Institute, Portland State University, P.O. Box 751, Portland, OR 97207.

Principal Investigator: Dr. Norman Wyers (503) 725-5136

State Contact: Jim Neely (503) 378-5906

OREGON 2

JOBS Plus Program provides participants with short-term subsidized public or private on-the-job training at the state minimum wage, plus supplemental payments to offset any loss of benefits. It also distributes child support collections directly to the custodial parent, and increases the asset limit.

Source of Evaluation Information: *Evaluation Plan, JOBS Plus Program*, Regional Research Institute, Portland State University, P.O. Box 751, Portland, OR 97207, July 5, 1995.

Principal Investigator: Dr. Norman Wyers (503) 725-5136

State Contact: Jim Neely (503) 378-5906

SOUTH DAKOTA

Strengthening South Dakota Families Initiative eliminates most exemptions, imposes time limits on AFDC benefits of 24 months for those assigned to employment-readiness track and 60 months for those assigned to training track; makes the full family ineligible for benefits for three months if a parent voluntarily quits employment; disregards income and assets of full-time students and provides transitional employment allowance.

Source of Evaluation Information: *The Strengthening South Dakota Families Initiative Evaluation Analysis Plan; Statistical Analysis and Work Plans For the Impact Study*, Business Research Bureau, School of Business, University of South Dakota, Vermillion, SD 57069, December 14, 1994.

Principal Investigator: Stephen Tracy (605) 677-5287

State Contact: Steve Flyer (605) 773-5353

UTAH

Single Parent Employment Demonstration (SPED) provides more generous income disregards; increases the resource and vehicle asset limits; eliminates most JOBS exemptions; imposes sanctions for noncompliance; provides incentives for enhanced participation; provides JOBS services to noncustodial parents; provides Food Stamps benefits in cash; and provides for a diversion payment of up to three times the monthly grant level. Individualized self-sufficiency plan prior to eligibility determination increased emphasis on child support collection.

Source of Evaluation Information: *Single Parent Employment Demonstration Program Evaluation Plan*, Social Research Institute, University of Utah, 101 S.W. Building, Salt Lake City, UT, June 1993.

Principal Investigator: Fred Janzen (801) 581-3641

State Contact: Bill Biggs (801) 538-4337

VERMONT

Family Independence Project (FIP) requires participation in subsidized employment after 30 months for AFDC and 15 months for AFDC-UP cases; sanctions participants who fail to accept, quit, or get fired from a job or who fail to participate in the community service program; eliminates most exemptions (age of child exemption is reduced to 16 weeks); sends child support payments directly to parents; provides more generous earnings disregards and asset limits; requires most minors to live in a supervised setting; requires pregnant and parenting minors to attend school/training; and provides Transitional Medicaid.

Source of Evaluation Information: *Design and Workplan for Evaluating Vermont's Welfare Restructuring Project*, Manpower Demonstration Research Corporation, Three Park Avenue, New York, NY 10016, February 7, 1995. (Additional information obtained through a review of NCCP's appendices by Virginia Knox.)

Principal Investigator: Barbara Goldman (212) 532-3200

State Contact: Donna Jenckes (802) 241-2794

VIRGINIA

Virginia Incentives to Advance Learning (VITAL) provides incentive payments as well as sanctions for families of AFDC children in grades six to eight who meet (or do not meet, in the case of sanctions) goals for student attendance and achievement and parent involvement.

Source of Evaluation Information: *Virginia Incentives to Advance Learning Interim Report*, Center for Public Administration and Policy, Virginia Polytechnic Institute and State University, August 5, 1994.

Principal Investigator: Renee Loeffler (703) 698-6081

State Contact: Larry Mason (804) 692-1909

WISCONSIN 1	**Wisconsin's Learnfare Program** sanctions AFDC teenagers (those who are on their parents' AFDC grant and those who are parents themselves) for unexcused absences from school. It provides case management to those teenagers in danger of being sanctioned and those already being sanctioned. **Source of Evaluation Information**: *An Evaluation of Learnfare Case Management Services; Research Design Evaluation of the Learnfare Expansion Program*, Legislative Audit Bureau, 131 W. Wilson Street, Suite 402, Madison, WI 53703, July 1994. **Principal Investigator**: Judith Frye (608) 266-2818 **State Contact**: Cindy Strycker (608) 267-4518
WISCONSIN 2	**Parental and Family Responsibility Demonstration Project (PFR)** reduces the amount by which AFDC grants are increased after the birth of a second child and eliminates increases in benefits after the birth of a third child; provides more generous income disregards; requires participation in education and employment services, including parenting and life skills; eliminates most JOBS exemptions; sanctions noncooperation; and provides JOBS services to noncustodial parents if court-ordered. **Source of Evaluation Information**: *Evaluation of the Parental and Family Responsibility Demonstration Project*, Maximus, Inc., 1356 Beverly Road, McLean, VA 22101, March 1994. **Principal Investigator**: Dr. Philip Richardson (703) 734-4281 **State Contact**: Jean Scheil (608) 266-0613
WISCONSIN 3	**Work Not Welfare Demonstration Project (WNW)** combines AFDC and Food Stamps into one cash payment; sends child support payments directly to parents; limits welfare grants to two years of cash benefits and one year of transitional benefits within a 48-month period; requires work (including job search or employment in subsidized community jobs if unable to find unsubsidized work); and eliminates increased AFDC benefits for additional children. **Source of Evaluation Information**: *Evaluation of the Work Not Welfare Demonstration Project*, Maximus, Inc., 1356 Beverly Road, McLean, VA 22101, January 1995. **Principal Investigator**: Dr. Philip Richardson (703) 734-4281

APPENDIX 2

State Waiver Evaluation Research Questions*

(Those questions related directly to children's needs or to parenting appear in ***bold italics***.)

STATE NAME	RESEARCH QUESTIONS/AREAS OF EXPLORATION
ARKANSAS	1. ***Does AWDP affect the average number of births, participation in family planning services, and the use of birth control among participants?***
	2. ***Does AWDP affect the number of paternities established and the number of new child support orders of participants?***
	3. ***Does AWDP affect the number of substantiated instances of child abuse and the use of foster care among participants?***
	4. Does AWDP affect the school attendance or the average years of education of participants?
	5. Does AWDP affect participation in each component of the JOBS (or New Hope) program, the number of quarters of employment, the average earned income, and total family income of participants?
	6. Does AWDP affect the average incidence of receipt of AFDC, amount of AFDC, amount of food stamps, amount of paid Medicaid claims, and entries (exits and reentry) on AFDC rolls among participants?
	7. Does AWDP affect the average number of address changes?
COLORADO	1. Does CPREP increase employment and earnings, and employment retention?
	2. Does CPREP result in higher levels of educational achievement and job training?
	3. Does CPREP reduce recidivism to AFDC among clients leaving with earnings?
	4. Does CPREP simplify the administration of public assistance programs?
	5. ***Does CPREP improve the immunization rate among children ages two and younger?***
	6. Does CPREP increase client well-being without increasing overall government expenditures?
FLORIDA	1. What effects does the Family Transition Program have on welfare recipients' behavior and ***family circumstances*** across a wide range of outcome measures?
	2. Do the FTP's effects vary across different subgroups of the welfare population?
	3. Do the FTP's effects vary between the voluntary and mandatory sites?
	4. To what extent do various components of FTP contribute to its overall effects?
	5. How do site policies and staff practices influence FTP effects?
	6. How do local economic and other contextual factors influence FTP's effects?
ILLINOIS	(Impact Analysis Hypotheses Only)
	1. ***Participation in the project will result in a greater amount of interaction between the participants and their dependent children.***
	2. ***Participation in the project will result in a more internal locus-of-control and locus-of-responsibility.***

* Several questions or hypotheses were sometimes summarized together to develop uniformity in the scope of the questions asked.

	3. ***Participation in the project will result in higher levels of self-esteem.***
	4. Participation in the project will result in higher employment rates.
	5. ***Participation in the project will result in greater child support payments.***
	6. Participation in the project will result in greater self-sufficiency, as evidenced in the amount of public assistance received and as evidenced on behalf of the participants' dependent children.
IOWA	1. What is required to develop, implement, and operate effective services, incentives, and responsibilities? What contextual factors influence the success of the intervention and its replicability elsewhere?
	2. How successful is the welfare reform package in moving families from dependency to self sufficiency, ***improving family stability*** and strengthening the responsibilities of families for their own well-being?
	3. What are the resource costs of the welfare reform package? Do the benefits derived from welfare reform outweigh these costs for the recipients, various levels of government, and society as a whole?
	4. Does the welfare reform package meet the requirement of being cost neutral for the federal government with respect to benefit and administrative costs for FIP, Food Stamps, and Medicaid?
MARYLAND	1. ***What is the effect of the PPI on school attendance?***
	2. What is the effect of the PPI on high school graduation or GED completion?
	3. ***What are the effects of the PPI on the amount and timeliness of preventive care visits for preschool children, for school-age children,*** and for adults? ***What is the effect of the PPI on the timing and amount of prenatal care received by pregnant recipients?***
	4. What are the effects of the PPI on the utilization of New Choices seminars and targeted case management? What are the effects on the rates of referral for and average number of completed services?
	5. What are the effects of the PPI on AFDC costs, Medicaid costs, Food Stamp costs, and total costs? What are the effects on case months, average costs per month, sanction rates, and exits and re-entry?
	6. What is the effect of the PPI on the total number of hospital days used?
	7. ***What are the effects of participation in targeted case management and in the New Choices Program on school attendance and timeliness of preventive care obtained for preschool children?***
	8. ***What are the effects of the PPI on the number of AFDC children who receive regular Early and Periodic Screening, Diagnosis, and Treatment Services (EPSDT)?***
MICHIGAN	1. What is the impact of TSMF on employment and earnings of adults and children?
	2. What is the impact of TSMF on welfare dependency , including participation in the AFDC, SFA, Food Stamp, and Medicaid programs?
	3. What is the impact of TSMF on the numbers of recipients combining welfare and work?
	4. What is the impact of TSMF on welfare payments for AFDC, SFA, and food stamps?
	5. ***What is the impact of TSMF on family stability and child well-being?***
	6. What is the impact of TSMF on social contract activities?
MINNESOTA	1. What is the effect of changing financial incentives for AFDC single parents?

	2. What is the effect of the interaction of financial incentives and MFIP case management for AFDC single-parent cases? What is the effect of different variations of case management? 3. What is the effect of MFIP financial incentives and case management services (either in combination or alone) on various subgroups among AFDC single-parent cases? 4. How do MFIP financial incentives and case management services affect the behavior of two-parent AFDC and non-public assistance Food Stamp families? 5. How does MFIP affect individuals who live in rural areas compared to those living in urban areas? 6. To what extent does MFIP encourage individuals who are not currently on public assistance to reduce their work effort in order to become eligible for AFDC, GA, or Food Stamps?
NEW JERSEY	1. The net impact of FDP provisions and waivers on educational achievement, employment, earnings, and AFDC continuance. 2. ***The net impact of FDP on family functioning, and formation, health status, actual and expected fertility rates, abortion rates, youth functioning, and quality of life.*** 3. Subgroup differentials on earnings, AFDC savings, educational achievement, ***family formation***, fertility, employment, and mobility. 4. Costs and cost-effectiveness of FDP from societal state and federal budget perspectives, as well as from the AFDC recipient perspective.
NEW YORK	1. Does CAP motivate and help clients to increase their earnings? 2. ***Does CAP motivate and help clients to obtain complete child support orders?*** 3. Does CAP allow clients to raise their income above the poverty level even before becoming independent of assistance? 4. Does CAP allow clients to attain enough income from earnings and child support and accumulate enough resources to move into sustained self-sufficiency?
OHIO 1 – LEARNING, EARNING, AND PARENTING (LEAP)	1. ***Does LEAP improve eligible teens' school enrollment and attendance, and, in the longer term, their rates of high school graduation and GED completion?*** 2. What are the effects of LEAP on different subgroups of the population? 3. Do the benefits of LEAP exceed the program's costs, from the perspectives of eligible teenagers, government budgets, and society as a whole?
OHIO 2 – TRANSITIONS TO INDEPENDENCE	1. Does the demonstration affect welfare recipients' employment, earnings, AFDC participation, and AFDC benefit amounts? 2. What are the effects of the demonstration on different subgroups of the population? 3. What are the effects of providing transitional child care and Medicaid on transitions from welfare to work?
OREGON 1 – JOBS WAIVER	1. Do the JOBS waivers reduce welfare dependency? 2. Do the JOBS waivers increase gainful employment? 3. ***Do the JOBS waivers increase the proportion of teenage custodial parents and PLM recipients remaining in and completing high school (or equivalency)?***
OREGON 2 – JOBS PLUS PROGRAM	1. Does JOBS Plus affect AFDC, Food Stamps, Medicaid participation, as well as program costs? 2. Does JOBS Plus affect promotion of self-sufficiency?

	3. ***Does JOBS Plus affect family structure and stability?***
	4. ***Does JOBS Plus affect well-being of children (including long-term prospects for self-sufficiency)?***
	5. Does JOBS Plus affect Food Stamp cash out on the incidence of acute food shortage or changes in the perceived adequacy of home food supply?
	6. Does participation in mandatory nutrition education affect participants' nutritional knowledge, skills, attitudes, and behaviors?
SOUTH DAKOTA	1. Does the demonstration promote self-sufficiency?
	2. Does the demonstration affect AFDC, Food Stamp, and Medicaid participation and program costs?
	3. Does the demonstration affect participation in JOBS?
	4. Does the demonstration lead to fewer current and non-current recipients quitting voluntarily without good cause?
	5. Does the demonstration result in greater savings and employment among teenage recipients?
	6. ***Does the demonstration affect family structure and stability?***
	7. ***Does the demonstration affect the well-being of children, including their long-term prospects for self-sufficiency?***
UTAH	1. Does SPED help AFDC recipients achieve self-sufficiency?
	2. Does SPED affect AFDC, Food Stamp, and Medicaid participation and program costs?
	3. How does SPED affect participation in JOBS, the Food Stamp Employment and Training program, and other SPED activities, ***and cooperation with the Child Support Enforcement program?***
	4. Does SPED affect the length of time on assistance?
	5. Does SPED increase family income through increased earned income and child support?
VERMONT	1. To what extent does Vermont's Welfare Restructuring Project (WRP) (i.e. the interaction of financial incentives with time limits and related activities, particularly community service jobs) increase unsubsidized employment and earnings; increase job retention; increase hours worked; and affect the type of jobs and wage levels?
	2. What is the effect of only changing financial incentives for ANFC single parents? for two-parent (both unemployed and incapacitated) cases? What is the separate effect of time limits combined with community services employment (CSE)?
	3. To what extent does the Vermont project: reduce or increase ANFC and Food Stamp benefits; reduce or increase grant approval rates among applicants; reduce ANFC and Food Stamp recidivism in the long-run; increase total income and self-sufficiency; and reduce poverty? What is the effect of the changing financial incentives independent of the time limits combined with a work requirement?
	4. What is the impact of WRP (and its key components) on various subgroups of welfare applicants and recipients? That is, who benefits the most or least?
	5. Does WRP affect outcomes relating to participation in education, training, or ***parenting programs?***
	6. ***Does WRP affect behavior relating to children (e.g., use of child protective services, family composition)?***
VIRGINIA	1. ***Does the VITAL program result in improved school attendance?***
	2. ***Does the VITAL program result in improved achievement?***
	3. ***Does the VITAL program result in increased parental involvement?***

WISCONSIN 1 – LEARNFARE EXPANSION PROGRAM	1. ***How well does the Learnfare Expansion Program achieve its primary goal of school attendance?*** 2. What is the rate of sanctioning in the treatment group? 3. What effect does Learnfare Expansion have on public assistance receipt?
WISCONSIN 2 – PARENTAL AND FAMILY RESPONSIBILITY (PFR)	1. Does PFR reduce welfare dependency, including benefits and months on AFDC, Food Stamps, and Medicaid, among families headed by teenage parents? 2. Does PFR reduce the costs of welfare benefits, including AFDC, Food Stamps, Medicaid, child care, and work-related services used by PFR families? 3. ***Does PFR delay subsequent pregnancies and births to teen parents who are receiving AFDC?*** 4. ***Does PFR strengthen family life by enabling the formation and preservation of two-parent families?*** 5. ***Does PFR improve the well-being of children by providing educational, employment-related, health, and personal development services to AFDC recipient parents and non-custodial parents, and by providing health and social services to children?*** 6. Does PFR increase the gainful employment of AFDC parents? 7. ***Does PFR increase child support collections and expedite paternity establishment among PFR families?***
WISCONSIN 3 – WORK NOT WELFARE (WNW)	1. Does WNW help recipients attain greater employability skill levels and achieve increased rates of employment and reduce welfare dependency? 2. ***How does WNW affect family structure and stability?*** 3. ***How does WNW affect the well-being of children, including their long-term prospects for self-sufficiency?*** 4. How does WNW affect welfare entry and migration in demonstration counties?

APPENDIX 3

Children's Well-Being Variables Included in the "Impact Analysis" Components of State Waiver Evaluations

STATE NAME	AR	CO	FL	IL	IA	MD	MI[1]	MN	NJ	NY	OH[2] 1	OH 2	OR 1	OR 2	SD	UT	VT	VA	WI 1	WI 2	WI 3
Child Care																					
Quality Measures																					
Satisfaction with child care arrangements; reported reliability and quality		✓	✓					✓	✓[3]		✓			✓			✓				
Child Care Arrangements																					
Type of substitute care arrangements made; use and type of child care arrangement during current or most recent job		✓	✓					✓	✓		✓			✓	✓		✓				
Shift in child care choices (resulting from implementation of prospective child care subsidy payment that would presumably increase parental choice)		✓																			
Age and special needs of child receiving care									✓[3]					✓							
Access to care; lack of child care as obstacle to school/work	✓		✓			✓		✓	✓[3]	✓	✓	✓		✓			✓		✓		
Youth left alone, for varying lengths of time, before and after school, kindergarten or nursery activities									✓												
Receipt of Child Care Subsidies																					
Receipt of TCC, including number of months		✓	✓		✓							✓					✓				
Number of months received child care subsidies of any type		✓						✓	✓[3]					✓							
Hours per week, per month of child care	✓	✓							✓[3]				✓	✓							

[1] Michigan's evaluation plan indicates it will estimate family stability from a client survey, but specific outcome indicators were not listed in the report.

[2] Many of the variables listed were obtained through a telephone interview with the principal investigators for the evaluation.

[3] Collected for a supplemental study to the impact evaluation.

STATE NAME	AR	CO	FL	IL	IA	MD	MI[1]	MN	NJ	NY	OH[2] 1	OH 2	OR 1	OR 2	SD	UT	VT	VA	WI 1	WI 2	WI 3
Measures of Cost, Price or "Value"																					
Dollar value of TCC payments, including average monthly total	✓	✓			✓										✓						
Cost of child care arrangements, including value of benefits received and as percentage of total family income		✓	✓					✓	✓	✓	✓		✓	✓	✓	✓	✓			✓	✓
Dollar value of non-AFDC child care subsidies received		✓									✓			✓	✓						
Incurred child care expenses; amount of expenses not subsidized			✓					✓	✓[3]	✓							✓				
Child Health																					
Measures of Children's Health Status																					
"Health status"	✓		✓					✓		✓	✓			✓	✓	✓					
Prenatal care received, including timing and amount						✓			✓[3]												
Complications, cost of neonatal care						✓															
Gestational age at delivery						✓															
Birthweight						✓															
Child immunization rates		✓	✓			✓	✓														
Receipt of WIC nutritional services						✓															
Use of regular, preventive health services, timeliness and amount of preventive services; receipt of health services						✓								✓						✓	
School missed due to illness														✓							
Medicaid Information																					
Eligibility for Medicaid; incidence of use; number of months of eligibility	✓	✓	✓	✓	✓	✓	✓	✓	✓[3]	✓	✓		✓	✓	✓	✓	✓			✓	✓

[1] Michigan's evaluation plan indicates it will estimate family stability from a client survey, but specific outcome indicators were not listed in the report.

[2] Many of the variables listed were obtained through a telephone interview with the principal investigators for the evaluation.

[3] Collected for a supplemental study to the impact evaluation.

STATE NAME	AR	CO	FL	IL	IA	MD	MI[1]	MN	NJ	NY	OH[2] 1	OH 2	OR 1	OR 2	SD	UT	VT	VA	WI 1	WI 2	WI 3
Value of claims paid (by quarter); aggregate expenditures	✓	✓	✓	✓	✓	✓			✓[3]					✓	✓	✓				✓	✓
Level of services; number of hospital days used									✓[3]					✓			✓			✓	
Health Insurance Coverage After AFDC Ends																					
Receipt of Transitional Medicaid		✓	✓					✓	✓	✓		✓				✓	✓			✓	✓
Private health insurance/benefits status		✓	✓					✓	✓	✓	✓			✓		✓	✓			✓	✓
Type of health coverage package									✓	✓										✓	
Consumer costs; cost of utilization of health coverage package; premiums paid by consumer for transitional Medicaid									✓	✓										✓	✓
Perceived need, utilization, and satisfaction with private health insurance coverage; satisfaction with doctor and delivery system									✓												
Access and utilization barriers of health care, preventive health care, or vaccinations						✓			✓												
Household members with no Medicaid/medical coverage			✓							✓							✓				
Health insurance coverage from any source		✓							✓[3]	✓				✓	✓						
Type of provider (HMO, private)						✓			✓[3]					✓							
Child Welfare																					
Rate of foster care placement; use of foster care; length of use of foster care	✓				✓									✓	✓					✓	✓
Child abuse and neglect; including "rate," "reports," and "incidence"	✓				✓				✓[3]					✓	✓		✓			✓	✓
Child's delinquent or aggressive behaviors; disciplinary referral	✓		✓					✓	✓					✓			✓				

[1] Michigan's evaluation plan indicates it will estimate family stability from a client survey, but specific outcome indicators were not listed in the report.

[2] Many of the variables listed were obtained through a telephone interview with the principal investigators for the evaluation.

[3] Collected for a supplemental study to the impact evaluation.

STATE NAME	AR	CO	FL	IL	IA	MD	MI[1]	MN	NJ	NY	OH[2] 1	OH 2	OR 1	OR 2	SD	UT	VT	VA	WI 1	WI 2	WI 3
Rate of child delinquency adjudication					✓																
Family or child alcohol/drug abuse	✓													✓							
Child Education[3]																					
School achievement; school behavior and performance; progress to next grade			✓					✓	✓		✓						✓	✓	✓		
Attainment of high school diploma/GED	✓					✓			✓		✓		✓								
School enrollment	✓								✓[4]		✓			✓	✓				✓		
School attendance rates/rates of unexcused absences	✓		✓			✓		✓			✓			✓			✓	✓	✓		✓
Sanction rates for non-school attendance or for noncompliance/ noncooperation						✓			✓[4]		✓		✓	✓					✓		
Need for alternative education, tutoring, other academic services																					
Parenting/Family Functioning																					
Measures of Quality of Parenting																					
Ever received counseling for personal problems (parent)	✓								✓		✓			✓		✓			✓		
Ever received parent skills training									✓		✓						✓			✓	
Parent answers to "supervision/ involvement scale" questions	✓								✓												
Parent's involvement in child's education			✓						✓[4]		✓						✓	✓			
Parent perceptions of the effects of work, education or training on children and parenting			✓					✓	✓					✓			✓				
Maternal stress and depression								✓													

[1] Michigan's evaluation plan indicates it will estimate family stability from a client survey, but specific outcome indicators were not listed in the report.
[2] Many of the variables listed were obtained through a telephone interview with the principal investigators for the evaluation.
[3] Sometimes child education variables refer to children on AFDC; sometimes to teenage parents and sometimes both.
[4] Collected for a supplemental study to the impact evaluation.

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STATE NAME	AR	CO	FL	IL	IA	MD	MI[1]	MN	NJ	NY	OH[2] 1	OH 2	OR 1	OR 2	SD	UT	VT	VA	WI 1	WI 2	WI 3
Measures of Father's Involvement																					
Paternity establishment	✓								✓	✓						✓				✓	
Child support payment measures (value of orders, value of actual payments)	✓	✓	✓	✓	✓				✓	✓	✓			✓		✓	✓			✓	✓
Father's contact with/quality of relationship with children	✓			✓							✓										
Father's score on locus of control, self-esteem, and responsibility				✓																	
Measures of Family Instability/ Dysfunction																					
Homelessness status/vendor shelter payments	✓										✓			✓	✓						✓
Number of address changes	✓							✓	✓		✓										
Domestic abuse cases														✓						✓	
Other Measures of Parent Functioning																					
Church attendance; childhood church attendance	✓			✓					✓[3]												
Family Structure and Formation																					
Marriage rate; marital status; ever married	✓	✓	✓	✓	✓			✓	✓	✓	✓			✓	✓		✓			✓	✓
Divorce rate; separation status; ever divorced		✓			✓					✓	✓			✓	✓					✓	✓
Household composition; living arrangements; including "two-parent households" & "step-parent families"	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓		✓	✓			✓	✓
Preferences about ideal number of children "people should have"	✓								✓												
Preferences of the number of children would like personally; attitudes about family formation	✓								✓		✓										

[1] Michigan's evaluation plan indicates it will estimate family stability from a client survey, but specific outcome indicators were not listed in the report.
[2] Many of the variables listed were obtained through a telephone interview with the principal investigators for the evaluation.
[3] Collected for a supplemental study to the impact evaluation.

STATE NAME	AR	CO	FL	IL	IA	MD	MI[1]	MN	NJ	NY	OH[2] 1	OH 2	OR 1	OR 2	SD	UT	VT	VA	WI 1	WI 2	WI 3
Discrepancy between ideal and actual number of children	✓								✓												
Birth and/or fertility rates—adult recipients	✓	✓	✓						✓	✓	✓						✓			✓	✓
Birth rates—daughters of adult recipients		✓							✓												
Cases where parent is not a caretaker					✓	✓	✓			✓											✓
Transition rate—AFDC to AFDC-UP and AFDC-UP to AFDC			✓		✓									✓	✓						✓
Attendance at family planning sessions/use of birth control/type of birth control	✓					✓			✓[3]												
Other Indicators of Child Well-Being																					
Children with earnings							✓														
Child's performance of household chores									✓	✓[3]											
Child's participation in organizations/extracurricular activities	✓							✓	✓												
"Health and safety outcomes;" feelings of safety in school			✓								✓						✓				
Ever received counseling for personal problem (child)																					
Subgroup Analysis																					
Teenage parents	✓		✓		✓				✓		✓		✓		✓	✓	✓	✓	✓		✓
Families with youngest child under age three		✓	✓		✓	✓	✓	✓		✓	✓	✓					✓			✓	✓
Families with youngest child under age six		✓	✓		✓			✓				✓					✓			✓	✓

[1] Michigan's evaluation plan indicates it will estimate family stability from a client survey, but specific outcome indicators were not listed in the report.

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[3] Collected for a supplemental study to the impact evaluation.

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SUPPLEMENT TO THE WORKING PAPER

State Welfare Waiver Evaluations: Will They Increase Our Understanding of the Impact of Welfare Reform on Children?

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NATIONAL CENTER FOR CHILDREN IN POVERTY
COLUMBIA SCHOOL OF PUBLIC HEALTH

The **National Center for Children in Poverty** (NCCP) was established in 1989 at the School of Public Health, Columbia University. Its mission is to identify and promote strategies that reduce the number of young children living in poverty in the United States, and that improve the life chances of the millions of children under six who are growing up poor.

The Center:

- Alerts the public to demographic statistics about child poverty and to the scientific research on the serious impact of poverty on young children, their families, and their communities.
- Designs and conducts field-based studies to identify programs, policies, and practices that work best for young children and their families living in poverty.
- Disseminates information about early childhood care and education, child health, and family and community support to government officials, private organizations, and child advocates, and provides a state and local perspective on relevant national issues.
- Brings together public and private groups to assess the efficacy of current and potential strategies to lower the young child poverty rate and to improve the well-being of young children in poverty, their families, and their communities.
- Challenges policymakers and opinion leaders to help ameliorate the adverse consequences of poverty on young children.

The Center's publications program is funded largely through core grants from the Ford Foundation and the Carnegie Corporation of New York.

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Introduction

Recognizing that federal and state welfare reform initiatives are likely to have a significant impact on children, early in 1995, NCCP began to explore issues related to children and welfare reform. In the spring of 1996 the National Center for Children in Poverty (NCCP) produced a working paper titled, *State Welfare Waiver Evaluations: Will They Increase Our Understanding of the Impact of Welfare Reform on Children?* This paper was based on an analysis of the evaluation plans from 22 state experiments approved prior to the enactment of The Personal Responsibility and Work Opportunities Reconciliation Act of 1996 (P.L. 104-193). The paper is part of the Center's *Children and Welfare Reform Project* funded by the Annie E. Casey Foundation. The goal of the Project is to focus attention on the impact of welfare reform on the well-being of children.

The working paper includes a summary of relevant research and examines three areas where welfare reform could have a major impact on children: (1) by changing family income, (2) by affecting parental stress and parenting, and (3) by changing children's access to services and supports outside the family that promote children's healthy growth and development. The appendices provide detailed, state by state information on the numbers and categories of research questions and hypotheses that relate to children, the child-related variables that the evaluations use to seek answers to the research question, and the potential of these child-related variables to further the understanding of the impact of welfare experiments on children charting the research questions and variables included in the evaluations that relate to children's well-being. A list of state contacts and principal evaluators is also included.

Together the working paper and its supplement analyze a total of 40 evaluation plans of state welfare demonstrations in 26 states.* Our sources of information were the evaluation plans we were able to obtain from July 1995 through September 1996. The supplemental analysis included here extends the framework to an additional 13 states. It was developed in response to requests from researchers and evaluators who found the appendices of the first working

* The state of Illinois' *Fresh Start Initiative* has six components under their waiver. One component, the Parental Involvement Project, was evaluated in the original working paper and the five others were evaluated in the supplement. Each of the components has a separate evaluation plan.

paper especially useful. It includes:

- **Supplement to Appendix 1:** Background Information on Selected States. This section briefly describes the waiver approach for the 15 additional waivers, lists the source of the evaluation information, and provides contact names for the state welfare office and the principal investigator responsible for the evaluation.

- **Supplement to Appendix 2:** State Waiver Evaluation Research Questions. This section excerpts the principal questions or hypotheses that guide the 15 additional waiver evaluations. In some cases we merely excerpt the questions that guide the impact study portion of the evaluation (e.g., the random assignment evaluation required by previous federal law). Those questions directly related to children's needs or to parenting we have put in ***bold italics***.

- **Supplement to Appendix 3:** Children's Well-Being Variables Included in the "Impact Analysis" Components of State Waiver Evaluations. This chart identifies impact variables used in the evaluation that were determined to be directly related to child care, child health, child welfare, child education, parenting/family functioning, and other indicators of children's well-being.

Findings and Implications of the Supplement

This supplemental information continues to underscore the major findings highlighted in the working paper:

- Evaluators are collecting data related to children, but few variables are common across many states. the lack of common variables across states will dramatically reduce chances for cross-state learning to inform national policy.

- Some waiver evaluations may lead to some new information about child well-being that is readily interpretable in the areas of children's education, particularly for those states that are evaluating "learnfare" approaches.

- Some waiver evaluations will track some significant potential harms to children that may result from some welfare initiatives. Some evaluations measure significant family dysfunction, such as substantiated cases of child abuse and neglect, foster car placement rates, and alcohol or drug abuse.

- The waiver evaluations will not be able to demonstrate the many ways that welfare reform may have an impact on children's growth and development. In part, this is because very few variables used directly measure changes to children's growth and development.

- Variables in the evaluation plan related to children's services, but few related to the quality of services or to outcome measures that indicate the effectiveness of those services. This was particularly true of child care and child health.

The Personal Responsibility and Work Opportunities Reconciliation Act of 1996 (P.L. 104-193) eliminates the Aid to Families with Dependent Children (AFDC) program, the JOBS program and the Emergency Assistance (EA) programs and creates one Temporary Assistance to Needy Families (TANF) block grant. However, it does permit states to continue their waiver demonstrations, and a number of states still appear committed to evaluations. Most importantly, however, the new law gives states considerable latitude to shape their welfare programs. This means that understanding the impact not only of specific waivers, but broader reforms on children is more important than ever. Therefore, it is our hope that this supplemental report, as well as the original paper will be used by government officials, researchers, and advocates in developing strategies to assess the impact of emerging welfare reforms on children as well as to understand, to whatever limited extent is possible, the impact of current waiver initiatives.

SUPPLEMENT TO APPENDIX 1

Background Information on Selected States

CALIFORNIA

School Attendance Demonstration Project (SADP) in San Diego County requires AFDC recipients ages 16-18 to attend school or participate in JOBS program.

Source of Evaluation Information: *School Attendance Demonstration Project (SADP): Evaluation Plan*, the San Diego State University School of Social Work, San Diego, CA 92182 (Evaluation plan was a joint effort between the San Diego State University School of Social Work, the Child and Family Research Group, and the June Burnett Institute)

Principal Investigator: Dr. Loring Jones (619) 594-6508

State Contact: Michael C. Genest (916) 657-3546

CONNECTICUT

Reach For Jobs First modifies the previously approved "A Fair Chance" demonstration. Increases time limits and asset limits; disregards earnings; requires minor parent to live with adult; reduces benefit increase for additional children conceived while on AFDC by average of 1/2; has progressive sanctions up to whole family sanction for JOBS, child support and voluntary quit; two years of transitional Medicaid; requires at least 12 weeks of job search; transitional child care provided while family income below 75 percent of state median.

Source of Evaluation Information: *Waiver Terms and Conditions-Reach For Jobs First: Section 3: Evaluation Plan*, Manpower Demonstration Research Corporation, Three Park Avenue, New York, NY 10016.

Principal Investigator: Dan Bloom (212) 532-3200

State Contact: Mark Heuschkel (860) 424-5347

DELAWARE

A Better Chance (ABC) includes a 2 year limit on cash benefits for cases with employable adults 19 and over with up to 2 more years of benefits under pay after performance work experience program; no time limit for unemployable cases; self-sufficiency contract requirement; education and employment related sanctions from 1/3 to full loss of benefits; cash elimination penalties for non-compliance; sanctions for non-cooperation with child support; no AFDC increase with additional children conceived while parent on AFDC; eliminates AFDC-UP100-hour and work history rules; exempts certain savings accounts; increases resource limits; gives bonus for high school graduation; requires teen parents to live in adult supervised setting.

Source of Evaluation Information: *The A Better Chance Demonstration: Detailed Evaluation Plan*, Abt Associates, Inc. Hamden Square, Suite 500, 4800 Montgomery Lane, Bethesda, MD, Nov 1995.

Principal Investigator: Dr. David Fein (301) 913-0548

State Contact: Mary Ann Daniels (302) 577-4452

GEORGIA-1	**Personal Accountability and Responsibility Project (PAR)** provides family planning and parenting services; eliminates increased AFDC benefits for additional children born to families on welfare 2 or more years; requires able-bodied adults to accept full-time employment if they are not caring for children under age 14. **Source of Evaluation Information:** *Evaluation of Georgia Personal Accountability and Responsibility (PAR Project,* Georgia State University Research Foundation, 140 Decatur Street, Suite 1030, Atlanta, GA 30303, July 1996. **Principal Investigator:** Gary T. Henry (404) 651-3523 **State Contact:** Nancy Meszaros (404) 657-3608
GEORGIA-2	**Preschool Immunization Project (PIP)** requires recipients of AFDC with pre-school aged children to provide proof that their child's immunization status is up to date at the time of recertification and sanctions those who do not meet this requirement. **Source of Evaluation Information:** *Preschool Immunization Project Evaluation Study Protocol,* Abt Associates, Inc., 55 Wheeler Street, Cambridge, MA 02138, September 1994. **Principal Investigator:** Dr. Larry Kerpelman (617) 492-7100 **State Contact:** Diane Simms (404) 657-3603
ILLINOIS	**A Fresh Start** has six components, five of which are implemented statewide. 1) *Income Budgeting Project* budgets the clients earned income toward the AFDC grant amount in the first two months of employment and restores grant amount when employment ends; 2) Youth *Employment and Training Initiative* helps prepare children aged 14 through 19 in AFDC families for jobs by providing job readiness and training while in school; 3) *Family Responsibility Demonstration* eliminates the 100 hour work rule for two parent families; 4) *Homeless Families Support Demonstration* increases AFDC asset limits, extends AFDC medical eligibility to 24 months for families canceled due to employment, extends transitional child care to 24 months, and allows for up to six months of Crisis Assistance each year; and 5) Work *Pays Demonstration Project* enables recipients to keep more of their earnings and disregards two of every three dollars earned for as long as the recipient continues to work; and 6) Paternal Involvement Project (PIP) (see full working paper). **Sources of Evaluation Information:** 1) *Evaluation Plan for Income Budgeting Project,* Center for Governmental Studies at Northern Illinois University, DeKalb, IL, September 1994. **Principal Investigator:** Kay Hamed (815) 753-0933

2) *Youth Employment Initiative Evaluation Plan*, Illinois State University School of Social Work, Normal, IL, September 1994.

Principal Investigator: Quinn Sullivan (309) 438-5005

3) *Family Responsibility Demonstration: Evaluation Plan*, University of Illinois, Jane Addams School of Social Work, Chicago, IL September 1994. .

Principal Investigator: Sumati Dubey (312) 996-7096

4) *Illinois Homeless Families Support Demonstration: Fresh Start Initiative Evaluation Plan*, University of Illinois, School of Social Work, Urbana, IL, September 1994.

Principal Investigator: Dr. Anthony Halter (217) 244-5233

5) *Illinois Fresh Start Initiative: Work Pays Demonstration Evaluation Plan*, Center for Governmental Studies at Northern Illinois University, DeKalb, Illinois, September 1994.

Principal Investigator: Kay Harned (815) 753-0933

State Contact: (for all projects) David Gruenenfelder (217) 785-0754

MICHIGAN

To Strengthen Michigan Families (TSMF) requires Michigan families on AFDC to either participate in Job Opportunities and Basic Skills Training Program or Michigan's Social Contract Activities. Applicants for AFDC must actively search for jobs while eligibility is being determined; requires pre-school-age children be immunized and disregards the value of one vehicle.

Source of Evaluation Information: *The Evaluation of Strengthening Michigan Families: Fourth Annual Report: Third Year Impacts*, Abt Associates, Inc. 55 Wheeler Street, Cambridge, MA 02138, June 1996.

Principal Investigator: Dr. Alan Werner (617) 492-7100

State Contact: Robert Lovell (517) 373-1989

MISSISSIPPI

A New Direction Demonstration Project requires school attendance and immunization; a Work First component which cashes out food stamps and eliminates work hour requirements for AFDC-UP recipients; distributes child support collections directly to custodial family; requires noncustodial parent to participate in JOBS and Work First; Work Encouragement component removes time limit on earned income disregard; amended to include provision that a family's benefits will not increase as a result of additional children conceived while on AFDC; Work First component amended to include transitional Medicaid and child care and to sanction exempt clients who volunteer for and then drop out of JOBS without good cause.

Source of Evaluation Information: *Evaluation Plan for Mississippi New Directions Demonstration* , The Center for Applied Research, The Else School of Management, Millsaps College 1701 North State Street, Jackson, MS 39210 September 1995.

Principal Investigator: Dr. Phillip Taylor (601) 974-1248

State Contact: Zenotha Robinson (601) 359-4749

MISSOURI

Missouri Families-Mutual Responsibility Demonstration Project (MF-MRP) requires JOBS mandatory applicants and recipients to sign a self-sufficiency agreement with a 24 month AFDC time limit to be extended an additional 24 months when necessary; allows a resource limit of $5000; requires job search after 24 and 48-month time limit; denies benefits to those who received benefits for at least 36 months and was personally responsible for becoming unemployed; requires minor parents to live at home or in adult supervised setting; disregards earnings of minor parents up to 100 percent of Federal Poverty Guidelines; disregards earnings of minor parents who are students; eliminates work history and 100-hour rule for two parent families under 21 years-old; allows non-custodial parents credit against state child support debt if they participate in the JOBS program.

Source of Evaluation Information: *Missouri Families Mutual Responsibility Demonstration Project (MF-MRP) Design and Sampling Plan* , Department of Public Administration College of Business and Public Administration, University of Missouri-Columbia, 315 Middlebush Hall, Columbia, MO 65211, April 1995.

Principal Investigator: Dr. Sheilah Watson and Dr. John P. Forrester (573) 882-3304

State Contact: Denise Cross (573) 751-8970

MONTANA

Families Achieving Independence in Montana (FAIM) establishes Job Supplement Program to assist those at risk of becoming dependent on welfare; AFDC pathways program which establishes a Family Investment Agreement requiring parents to secure child support, obtain EPSDT services, and participate in the JOBS program and limits adult benefits to 24 months for single parent and 18 months for two parent households; Community Service Program requires 20 hours of community service form individuals who reach time limit but are not self-sufficient; passes child support directly to custodial parent; expands AFDC-UP benefits; increases dependent care as well as family income and program assistance disregards; expands eligibility for transitional child care and Medicaid.

Source of Evaluation Information: *FAIM: Families Achieving Independence or Montanans Evaluation Plan*, Department of Community and Government Studies at The University of Montana, 929 SW Higgins, Suite E, Missoula, MN 59801, May 1996.

Principal Investigator: Richard Offner (406) 243-6012

State Contact: Sue Skinner (406) 444-1917

OKLAHOMA

Learnfare Project in selected school districts requires school attendance of AFDC recipients aged 13-18

Source of Evaluation Information: *Evaluating the DHS Learnfare Project*, Department of Sociology at the University of Oklahoma, 780 Van Vleet Oval, Room 331 Kaufman Hall, Norman, OK 73019, July 1995.

Principal Investigator: Dr. Harold Grasmick and Dr. Peter Wood (405) 325-1751

State Contact: Ann Kent (405) 521-3932

SOUTH DAKOTA	**Strengthening South Dakota Families Initiative** time limits AFDC cash benefits to 24-60 months depending on employment readiness or training tracks; makes family ineligible for 3 months following voluntary quit; provides one month transitional allowance after case closes due to earnings; disregards earned income and other assets of full-time students. **Source of Evaluation Information:** *Strengthening South Dakota Families: Statistical Analysis and Work Plans for the Impact Study*, Business Research Bureau at the University of South Dakota, Vermillion, SD 57069, December 1994. **Principal Investigator:** Steve Tracy (605) 677-5287 **State Contact:** Steve Flyger (605) 773-4678
WISCONSIN 1	**AFDC Benefit Cap Waiver Demonstration** eliminates increased benefits to AFDC families who have additional children while receiving AFDC. **Source of Evaluation Information:** *Evaluation of the Wisconsin AFDC Benefit Cap Waiver Demonstration*, MAXIMUS, Inc. 1356 Beverly Road, McLean, VA 22101, December 1995. **Principal Investigator:** Dr. Phillip Richardson (703) 734-4281 **State Contact:** Jean Sheil (608) 266-0613
WISCONSIN 2	**Special Resource Account (SRA) and Vehicle Asset Limit (VAL) Waiver** allows AFDC recipients to save more in savings accounts to be used for education and training and loosens asset rules and increases automobile limits to allow recipients to obtain adequate transportation. **Source of Evaluation Information:** *Evaluation of the Resource Account and Vehicle Asset Limit Waiver Demonstration Projects*, MAXIMUS, Inc. 1356 Beverly Road, McLean, VA 22101, October 1994. **Principal Investigator:** Dr. Phillip Richardson (703) 734-4281 **State Contact:** Jean Sheil (608) 266-0613
WYOMING	**New Opportunities and New Responsibilities Welfare Reform Demonstration** requires recipients in three counties to work or perform community service; requires school attendance for those 16 and over; changes sanction penalties for non-compliance with work requirements; increases resource limit for employed families; limits the number of months AFDC is available or eliminates AFDC benefits for recipients who complete a post-secondary education program; provides JOBS to non custodial parents court ordered to participate. **Source of Evaluation Information:** *New Opportunities and New Responsibilities Welfare Reform Demonstration Impact Evaluation Interim Report*, Mary Byrnes, PO Box 746, Lavamie, WY 82070, August 1996. **Principal Investigator:** Mary Byrnes (307) 742-9599 **State Contact:** Ken Kaz (307) 777-5841

SUPPLEMENT TO APPENDIX 2

State Waiver Evaluation Research Questions and Hypotheses

(Those questions related directly to children's needs or to parenting appear in ***bold italics***.)

STATE NAME	RESEARCH QUESTIONS/AREAS OF EXPLORATION
CALIFORNIA ***SCHOOL ATTENDANCE DEMONSTRATION PROJECT***	1. ***What are the attendance patterns of 16- to 18- year old AFDC participants during SADP?*** 2. ***Does the AFDC financial penalty have a differential effect on subgroups of participants?*** 3. ***Can explanations for attendance, absences, completion rates, and dropout rates be identified?*** 4. ***Do AFDC financial penalties improve the school attendance of eligible students by involving families (e.g., parents) in enforcing compliance with the 80 percent minimum attendance requirement?*** 5. Do AFDC financial penalties have an external (spill over) effect on the food stamp program? 6. What is the effect of service delivery on attendance and school completion?
CONNECTICUT ***REACH FOR JOBS FIRST***	1. Do the financial incentives and other reforms included in Reach for Jobs First — when combined with refocused employment service policies — prove to be a more effective approach for increasing recipients' self-sufficiency than an approach that relies solely on the existing program?
DELAWARE ***A BETTER CHANCE (ABC)***	1. Does A Better Chance promote self-sufficiency? 2. Does the program affect AFDC, Food Stamp, and Medicaid participation and program costs? 3. Does the demonstration affect participation in employment and training activities? 4. ***Does the demonstration affect the well-being of children, including their long-term prospects for self-sufficiency?*** 5. ***Does the demonstration affect family structure and stability?***
GEORGIA-1 ***PERSONAL ACCOUNTABILITY AND RESPONSIBILITY PROJECT (PAR)***	1. Does PAR affect employment and self-sufficiency among families subject to its provisions? 2. Does PAR affect welfare dependency? 3. ***How does PAR affect family structure and stability?***
GEORGIA-2 ***PRESCHOOL IMMUNIZATION PROJECT***	1. ***What is the impact of PIP by age group on the proportion of preschool children in AFDC households that are up-to-date for each type of required immunization and for all immunizations combined?*** 2. ***What is the impact of PIP by age group on the proportion of preschool children in AFDC households that receive the required immunizations on time for each type of required immunization and for all immunizations combined?*** 3. ***What is the impact of PIP on AFDC caseload? On AFDC payments? On AFDC and food stamps combined?*** 4. What is the impact of PIP on Medicaid reimbursements?

ILLINOIS
FRESH START

[This includes evaluation questions and hypotheses from five of six of the components of the Fresh Start initiative: 1) Income Budgeting Project; 2) Youth Employment and Training Initiative; 3) Family Responsibility Demonstration; 4) Homeless Families Support Demonstration; and 5) Work Pays Demonstration. The sixth component — the Parental Involvement Project — was evaluated in the full working paper. Each of the components has a separate evaluation plan.]

Income Budgeting Project.

1. The experimental clients will have higher average earnings than the control clients.
2. The demonstration will result in a greater proportion of AFDC clients reporting earned income.
3. The demonstration will result in a greater proportion of AFDC clients accepting new employment.
4. The demonstration will result in a greater proportion of AFDC clients leaving assistance because of employment.
5. The demonstration will result in a lesser number of benefit months for the experimental clients.
6. The demonstration will result in lower average AFDC grant amounts for the experimental clients.
7. The demonstration will result in a lower proportion of former AFDC clients returning to assistance who have left because of earnings.

Youth Employment Training Initiative

1. ***The demonstration will result in more persons graduating from high school.***
2. ***The demonstration will result in fewer persons dropping out of school.***
3. ***The demonstration will result in improved grade point averages.***
4. ***The demonstration will result in improved school attendance.***
5. ***The demonstration will result in fewer teenage pregnancies.***
6. The demonstration will result in higher rates of employment after students' scheduled high school graduation dates.
7. The demonstration will result in less dependence upon public assistance after students' scheduled graduation date.

Family Responsibility Demonstration

1. The demonstration will result in a higher rate of employment by members of the experimental group.
2. The demonstration will result in higher earned income by members of the experimental group.
3. The demonstration will result in an increase in earned income which leads to cancellation from AFDC for the experimental group.
4. The demonstration will result in lower total months of assistance for the experimental group.
5. The demonstration will result in a greater number of partial AFDC grants due to earned income for the experimental group.
6. The demonstration will result in lower total assistance payments for the experimental group.
7. The demonstration will result in a lower rate of JOBS sanctions in the experimental group.
8. ***The demonstration will result in a lower rate of family separation in the experimental group.***
9. The demonstration will result in a greater number of cases with full-time employment for the experimental group.
10. The demonstration will result in higher hourly wages for the experimental group.

Homeless Families Support Demonstration

1. The demonstration will result in a nigher rate of employment by members of the experimental group.
2. The demonstration will result in greater earnings by the experimental group.
3. The demonstration will result in members of the experimental group receiving fewer AFDC benefits than the comparison group.
4. The demonstration will result in members of the experimental group receiving AFDC benefits fewer months than the comparison group.

	5. ***The demonstration will result in the experimental group spending less time in homeless shelters.*** 6. The demonstration will result in lower rates of AFDC recidivism. 7. The demonstration will result in more AFDC clients accepting new employment. *Work Pays Demonstration* 1. The demonstration will result in clients working more hours at existing jobs. 2. The demonstration will result in more AFDC clients working. 3. The demonstration will result in more clients leaving AFDC because of employment. 4. The demonstration will result in a greater proportion of applicants with earned income being denied.
MICHIGAN ***TO STRENGTHEN MICHIGAN FAMILIES***	1. TSMF will change the behavior and well-being of welfare recipients in Michigan, with a focus on the following outcomes: —employment and earnings of adults; ***—employment and earnings of children;*** —welfare dependency; including participation in the AFDC or SFA programs, the FSP, and the Medicaid Program; —combining work and welfare, and remaining on welfare without working; and —welfare payments, including those for AFDC or SFA, and food stamps.
MISSISSIPPI ***NEW DIRECTION DEMONSTRATION PROGRAM***	1. Does the demonstration promote self-sufficiency and the duration and receipt of AFDC and food stamps linked to resources? 2. ***Does the demonstration affect AFDC, food stamp, and Medicaid participation and program costs?*** 3. ***Does the demonstration affect family structure and stability?*** 4. ***Does the demonstration affect the well-being of children?*** 5. Does the WorkFirst component affect recipient's savings rates? 6. Does the WorkFirst component (food stamp cash out) affect household expenditures on food? 7. Does the WorkFirst component (food stamp cash out) increase the incidence of acute food shortages of change perceived adequacy of the home food supply? 8. Does the WorkFirst component (mandatory nutrition education) create change in nutritional knowledge, skills, attitudes, and behaviors?
MISSOURI ***MISSOURI FAMILIES-MUTUAL RESPONSIBILITY DEMONSTRATION PROJECT***	1. Compared to control group members who do and do not receive case management services, the experimental group is more likely a) to be employed; b) to retain their jobs; c) to have higher incomes. 2. Compared to control group member who do and do not receive case management services, the experimental group is less likely to become/ remain long-term welfare recipients. 3. Compared to the control group, the experimental group is more likely to possess a) a savings account; and b) a checking account. 4. ***The Parents' Fair Share program will decrease the child support arrearages owed to the state.***
MONTANA ***FAMILIES ACHIEVING INDEPENDENCE IN MONTANA (FAIM)***	1. Does the demonstration help recipients attain greater employability skill levels and achieve increased rates of employment? 2. How does the demonstration affect participation in JOBS and other education and training programs? 3. ***Does the demonstration affect family structure and stability?*** 4. ***Does the demonstration affect the well-being of children, including their long-term prospects for self-sufficiency?*** 5. ***Does the demonstration affect availability of optional Medicaid services when the need for these services is a barrier to employment?***

	6. ***Does the demonstration affect the health of children?*** 7. Does the demonstration affect the health of adult participants? 8. ***Does the demonstration affect AFDC, food stamp, and Medicaid participation?*** 9. ***How does the demonstration affect cooperation with the child support enforcement program?*** 10. Does the demonstration affect caseload size and program-related costs?
OKLAHOMA ***LEARNFARE PROJECT***	1. Do the experimental and control groups differ significantly on three different measures of school attendance? 2. ***Among subjects who were eligible to complete school during the year, is the proportion who actually completed greater among the experimental group than among the control group?*** 3. ***Among subjects who were ever eligible to complete school at any time during the duration of the LEARNFARE experiment, is the proportion who actually completed greater among the experimental group than among the control group?***
SOUTH DAKOTA ***STRENGTHENING SOUTH DAKOTA FAMILIES INITIATIVE***	1. Does the demonstration promote self-sufficiency? 2. ***Does the demonstration affect AFDC, Food Stamp, and Medicaid participation and program costs?*** 3. Does the demonstration affect participation in JOBS? 4. Does the demonstration lead to fewer current and non-current recipients quitting voluntarily without good cause? 5. Does the demonstration result in greater savings and employment amount teenage recipients? 6. ***Does the demonstration affect family structure and stability?*** 7. ***Does the demonstration affect the well-being of children, including their long-term prospects for self-sufficiency?***
WISCONSIN-1 ***AFDC BENEFIT CAP WAIVER DEMONSTRATION***	1. ***The benefit cap will encourage families to exercise greater responsibility with regard to child-bearing behavior, and that, as a result, fewer children will be born to families subject to the benefit cap.*** 2. The benefit cap will increase the number of recipients who obtain employment and improve employment-related outcomes (e.g., earnings), and will improve outcomes related to participation in education and job-training programs. 3. ***The benefit cap will reduce welfare dependency outcomes related to the amount and duration of AFDC, food stamp, and medical assistance participation.*** 4. ***The benefit cap will improve family structure and stability. In addition, among families with children born despite the benefits cap, the provision will improve child support enforcement outcomes.*** 5. ***The benefit cap will improve the well-being of children.***
WISCONSIN-2 ***SPECIAL RESOURCE ACCOUNT (SRA) AND VEHICLE ASSET LIMIT (VAL) WAIVER***	1. What is the effect of SRAs on the occurrence and amount of savings? 2. What is the effect of SRAs on education, training, or employment? 3. What is the effect of SRAs on welfare dependency? 4. What is the impact of SRAs on rates of employment?

WYOMING ***THE WYOMING WELFARE REFORM PROJECT***	1. Does the demonstration increase employment and self-sufficiency among AFDC recipients? 2. Does the demonstration reduce welfare dependency? 3. Does the demonstration affect the incidence of sanctions imposed on AFDC recipients? 4. Do the individuals whose AFDC benefits were terminated due to advanced education provisions become employed, and to what extent do their children continue to receive public assistance? 5. ***To what extent do court ordered obligors who are ordered to participate in WOW actually participate? Do the amounts of child support they pay increase? Does their participation affect the incidence of receipt of public assistance by the corresponding AFDC families?*** 6. Do the provisions related to fraud result in increased amounts repaid?

SUPPLEMENT TO APPENDIX 3

Children's Well-Being Variables Included in the "Impact Analysis" Components of State Waiver Evaluations

STATE NAME	CA	CT	DE	GA1	GA2	IL	MI	MS	MO	MT	OK	SD	WI1	WI2	WY
Child Care															
Quality Measures															
Satisfaction with child care arrangements; reported reliability and quality		✓													
Child Care Choices															
Type of substitute care arrangements made; use and type of child care arrangement during current or most recent job		✓													
Shift in child care choices (resulting from implementation of prospective child care subsidy payment that would presumably increase parental choice)															
Age and special needs of child receiving care															
Receipt of Child Care Subsidies															
Access to care; lack of child care as obstacle to school/work		✓	✓												
Receipt of TCC, including number of months		✓	✓												
Number of months received child care subsidies of any type								✓				✓			
Youth left alone, for varying lengths of time, before and after school, kindergarten or nursery activities															
Hours per week, per month of child care															

STATE NAME	CA	CT	DE	GA1	GA2	IL	MI	MS	MO	MT	OK	SD	WI1	WI2	WY
Measures of Cost, Price or "Value"															
Dollar value of TCC payments, including average monthly total															
Cost of child care arrangements, including value of benefits received and as percentage of total family income		✓	✓							✓		✓			
Dollar value of non-AFDC child care subsidies received; child care income deduction															
Incurred child care expenses; amount of expenses not subsidized			✓			✓							✓		
Child Health															
Measures of Children's Health Status															
Prenatal care received, including timing and amount			✓												
Complications, cost of neonatal care															
Gestational age at delivery															
Birthweight															
Child immunization rates			✓		✓			✓		✓					
"Health status"			✓			✓		✓		✓		✓			
Receipt of WIC nutritional services															
Use of regular, preventive health services, timeliness and amount of preventive services; receipt of health services										✓					
School missed due to illness										✓					
Medicaid Information															
Eligibility for Medicaid; incidence of use; number of months of eligibility		✓	✓	✓		✓	✓	✓		✓		✓		✓	✓
Value of claims paid (by quarter); aggregate expenditures			✓			✓	✓	✓	✓	✓		✓			

STATE NAME	CA	CT	DE	GA1	GA2	IL	MI	MS	MO	MT	OK	SD	WI1	WI2	WY
Level of services; number of hospital days used										✓					
Health Insurance Coverage After AFDC Ends															
Receipt of Transitional Medicaid		✓	✓					✓		✓					
Private health insurance/benefits status			✓					✓		✓		✓	✓	✓	
Type of health coverage package			✓			✓				✓			✓		
Consumer costs; cost of utilization of health coverage package; premiums paid by consumer for transitional Medicaid										✓		✓			
Perceived need, utilization, and satisfaction with private health insurance coverage; satisfaction with doctor and delivery system										✓					
Access and utilization barriers of health care, preventive health care, or vaccinations										✓					
Household members with no Medicaid/medical coverage		✓													
Health insurance coverage from any source						✓				✓		✓			
Type of provider (HMO, private)										✓					
Child Welfare															
Rate of foster care placement; use of foster care; length of use of foster care		✓	✓	✓				✓	✓	✓		✓	✓		
Child abuse and neglect; including "rate," "reports," and "incidence"			✓	✓				✓	✓	✓		✓			
Child's delinquent or aggressive behaviors; disciplinary referral										✓					
Rate of child delinquency adjudication															
Family or child alcohol/drug abuse															

STATE NAME	CA	CT	DE	GA1	GA2	IL	MI	MS	MO	MT	OK	SD	WI1	WI2	WY
Child Education															
School achievement; school behavior and performance; progress to next grade		✓	✓			✓				✓			✓	✓	
Attainment of high school diploma/GED	✓		✓			✓				✓			✓		
School enrollment	✓							✓		✓		✓	✓		
School attendance rates/rates of unexcused absences	✓	✓	✓	✓		✓		✓		✓			✓		
Sanction rates for non-school attendance or for noncompliance/ noncooperation	✓		✓			✓									
Need for alternative education, tutoring, other academic services															
Parenting/Family Functioning															
Measures of Quality of Parenting															
Ever received counseling for personal problems (parent)															
Ever received parent skills training															
Survey questions from a "parent role-competency scale" pertaining to work, school, homemaking, physical and mental health, and interactional roles															
Parent "supervision/involvement scale" questions															
Parent's involvement in child's education			✓												
Survey questions pertaining to effects of work, education or training on children and parenting															
Measures of Father's Involvement															
Paternity establishment				✓						✓			✓		

STATE NAME	CA	CT	DE	GA1	GA2	IL	MI	MS	MO	MT	OK	SD	WI1	WI2	WY
Child support payment measures (value of orders, value of actual payments)		✓	✓	✓		✓		✓	✓	✓			✓		✓
Father's contact with/quality of relationship with children						✓									
Father's score on locus of control, self-esteem, and responsibility						✓									
Measures of Family Instability/ Dysfunction															
Homelessness status/vendor shelter payments		✓	✓			✓		✓		✓		✓			
Number of address changes				✓		✓		✓					✓		
Domestic abuse cases										✓					
Children's living arrangements		✓	✓	✓		✓			✓	✓			✓		
Other Measures of Parent Functioning															
Church attendance; childhood church attendance						✓									
Family Structure and Formation															
Marriage rate; marital status; ever married		✓	✓			✓	✓	✓		✓		✓	✓		
Divorce rate; separation status; ever divorced		✓	✓					✓		✓		✓	✓		
Births of children conceived while parent receiving AFDC		✓	✓	✓				✓		✓			✓		
Household composition; living arrangements; including "two-parent households" & "step-parent families"		✓	✓		✓	✓		✓		✓					
Preferences about ideal number of children "people should have"															
Preferences of the number of children would like personally; attitudes about family formation								✓							

STATE NAME	CA	CT	DE	GA1	GA2	IL	MI	MS	MO	MT	OK	SD	WI1	WI2	WY
Discrepancy between ideal and actual number of children															
Birth rates—adult recipients		✓		✓				✓		✓					
Birth rates—daughters of adult recipients		✓	✓	✓						✓					
Cases where parent is not a caretaker															
Transition rate—AFDC to AFDC-UP and AFDC-UP to AFDC		✓	✓			✓		✓	✓	✓		✓	✓	✓	
Attendance at family planning sessions/use of birth control/type of birth control			✓	✓											
Other Indicators of Child Well-Being															
Child's performance of household chores															
Child's participation in organizations/ extracurricular activities															
"Health and safety outcomes;" feelings of safety in school															
Ever received counseling for personal problem (child)															
Subgroup Analysis															
Teenage parents												✓			
Families with youngest child under age three		✓													
Families with youngest child under age six		✓													

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